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State of Rhode Island

**Department of State - Business Services Division** 

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2023 AUG 24 P. 3: 18

## **Articles of Organization**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$150.00

Pursuant to the provisions of <u>RIGL.7-16</u> , the following Articles of Organization are adopted for the limited liability company to be organized hereby:					
The name of the limited liability company is:					
New york Large & Restraint LLC					
2. The name and address of the initial resident agent/office in Rhode Island is:					
Agent Name					
Harricia Kina					
Street Address (NOT a P.O. Box)					
206 Dorth Mins Street					
City/Town	State	Zip Code			
Worst Ket	RHODE ISLAND	02895			
3. Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as (CHECK ONE BOX).					
a disregarded as an entity separate from its member (single member LLC)					
a partnership					
a corporation					
4. The address of the principal office of the limited liability company, if it is determined at the time of organization:					
Street Address					
206 N main Street					
City/Town	State	Zip Code			
WOODSPCHUT	Knocke Island	02845			
5. The limited liability company has the purpose of engaging in any lawful business, and shall have perpetual existence					
until dissolved or terminated in accordance with RIGL <u>7-16</u> , unless a more limited purpose or duration is set forth in					
Section 6 of these Articles of Organization.					

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILEDIA (1)

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6. Additional provisions, if any, not consistent with law, which the member(s) elect to have set forth in these Articles				
of Organization, including, but not limited to, any limitation of the purpose(s) or duration for which the limited liability				
company is formed, and any other provision which may be included in an operating agreement:				
		Check th	nis box to indicate attachment	
7. The Limited Liability Company is to be managed by its:				
You MUST check one box:				
Members (Owners) DO NOT	OR	Managers (Individuals hired by the members with no ownership interest) Complete the chart below.		
complete the chart below.				
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		MANAGER NAME	ADDRESS	
		Edgardo butilrez	ADO 1) MainStreat	
		Potrick home	Woonsocket R.I	
			THE TAXABLE IN	
Check this box to indicate attachment				
8. Date when these Articles of Organization will be effective: CHECK ONE BOX ONLY				
Date received (Upon filing)				
U star officative data (Data must be as more than 00 days from the data of filing)				
Later effective date (Date must be no more than 90 days from the date of filing)				
Under penalty of perjury, I declare and affirm that I have examined these Articles of Organization, including any accompanying attachments, and that all statements contained herein are true and correct.				
Name of Authorized Person		Address		
Edgardo Guhuros	3	206 N Main St		
City/Town		State	Zip Code	
Woonsocket		RI	02895	
Signature of Authorized Person			Date /	
El al			8/24/23	
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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

August 24, 2023 03:18 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

